

DISCLOSURE SUMMARY PAGE**COMMITTEE NAME** (Must be same as on Statement of Organization)

Denise O'Brien for Secretary of Agriculture

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)State PAC (3)State Party
 (4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other
 Political Subdivision Candidate (8)County PAC (9)City PAC (10)School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name
 Denise O'Brien

Political Party (if applicable)
 Democrat

Office Sought
 Secretary of Agriculture

District (if Senate or House)

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

FORM
DR-2

(Rev. 12/2005)

DISCLOSURE
 REPORT

For Office Use OnlyComm. # 5119Logged In S

Scanned _____

Computer _____

Audited _____

File with:
 Iowa Ethics and Campaign
 Disclosure Board
 510 E. 12th, Ste. 1A
 Des Moines, Iowa 50319
 Fax: 515-281-3701

SIGNATURE OF PERSON FILING REPORT**TELEPHONE****DATE SIGNED**

I AM FILING A January 22, 2008 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 2
☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
 which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

843.00

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

1,633.07

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)**SUB-TOTAL**\$ 2,476.07**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

365.95

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

2,110.12

**UNPAID BILLS (From Schedule D - Attach Schedule D)\$

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Denise O'Brien for Secretary of Agriculture

☐ CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
04/04/07	ID# CK#	Headquist Productions Inc P.O. Box 1475, Fairfield IA 52556		\$1,632.83	<input type="checkbox"/>
	ID# CK#	The above was a refund for funds paid to headquist for media buys, but cost less than anticipated			<input type="checkbox"/>
01/31/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>
02/28/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>
03/31/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>
04/30/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>
05/31/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>
06/30/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>
07/31/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>
08/31/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>

SUB-TOTAL

\$ 1,632.99

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

COMMITTEE NAME (Must be same as on Statement of Organization)

Denise O'Brien for Secretary of Agriculture

☐ CHECK THIS BOX IF
AMENDING FORM

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
09/30/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		\$.02	<input type="checkbox"/>
10/31/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>
11/30/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>
12/31/07	ID# CK#	Nishna Valley Credit Union (interest on savings) 200 Maple St., Atlantic, IA 50022		.02	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 0.08	
TOTAL (if last page of this schedule)				\$ 1,633.07	

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Denise O'Brien for Secretary of Agriculture

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
03/18/07	ID# CK# DC	Health Services New Jersey	see attached note	\$ 237.00
06/17/08	ID# CK# DC	ThinkHost thinkhost.com	web domain renewal fee	28.95
08/08/07	ID# CK# 1325	The Data Bank 800 Washington Ave N Ste 303 Minneapolis MN 55401	fees for database usage and maintenance	100.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 365.95
TOTAL (if last page of this schedule)				\$ 365.95

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)